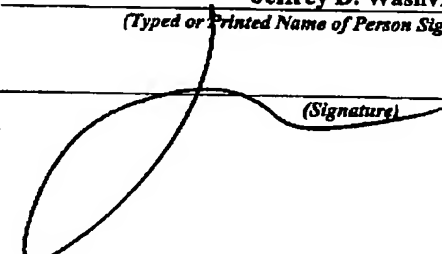

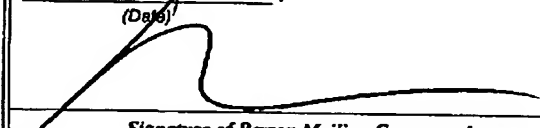


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): Isao Hanai			Docket No. HIR-140
Application No. 10/664,266	Filing Date 17 SEP 2003	Examiner PAPE, JOSEPH	Group Art Unit 3612
Invention: SHOCK-ABSORBING BUMPER DEVICE			
RECEIVED CENTRAL FAX CENTER JUL 18 2005			
<p>I hereby certify that this <u>17 Pg response to Final OA, Amendment Transmittal Document</u> <small>(Identify type of correspondence)</small></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>)</p> <p>on <u>18 JUL 2005</u> <small>(Date)</small></p> <p style="text-align: center;">19 PAGES TOTAL</p> <p style="text-align: right;"><u>Jeffrey D. Washville</u> <small>(Typed or Printed Name of Person Signing Certificate)</small></p> <p style="text-align: right;"> <small>(Signature)</small></p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			

JUL 18 2005

AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. HIR-140	
Applicant(s): Isao Hanai						
Application No. 10/664,266	Filing Date 17 SEP 2003	Examiner PAPE, JOSEPH	Customer No.	Group Art Unit 3612	Confirmation No. 3416	
Invention: SHOCK-ABSORBING BUMPER DEVICE						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	20 -	31 =	0	x \$25.00	\$0.00	
INDEP. CLAIMS	4 -	7 =	0	x \$100.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-2147 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
Signature  Jeffrey D. Washville, Reg. No. 46,366 LORUSSO & LOUD 15 Rye Street, Suite 212 Portsmouth, NH 03801 Phone (603) 427-0070 Fax (603) 427-5530			Dated: 18 JUL 2005			
<div style="border: 1px solid black; padding: 5px;"> I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on 18 JUL 2005 (Date)  Signature of Person Mailing Correspondence Jeffrey D. Washville Typed or Printed Name of Person Mailing Correspondence </div>						
CC:						

Appl. No. 10/664,266
Resp. Dated Jul. 18, 2005
Reply to Final OA of May 18, 2005

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Conformation No. 3416

Appl. No. : 10/664,266
Applicants : Isao Hanai
Filed : 17 SEP 2003
TC/A.U. : 3612
Examiner : PAPE, JOSEPH

Docket No. : HIR-140

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

After Final Amendment

Dear Sir or Madam:

In response to the Final Office Action of May 18, 2005, please amend the application as follows.

Amendments to the Claims are present and begin on page 2.

Remarks/Arguments begin on page 9 of this paper.